



# CITY OF WARREN MUNICIPAL POOL SEASON PASS APPLICATION

Please complete the following information to apply for a 2015 Season Pass for the City of Warren Municipal Pool. Application must be completed in full. Please call 723-6300 Ext. 116 if you have any questions.

## Type of pass requested

☐ Individual      ☐ Family      ☐ Family + Nanny      ☐ 55 and older      ☐ Group (non-profit)

**Head of Household Information** (if group pass, please list name and address of Company or contact person)

Name  Phone

Address

City  State  ZIP

Township

Please list all other family members wishing to receive a pass. Each person will receive a pass with their name on it. Please use a separate sheet of paper if additional space is needed.

Name (please print)	Relationship	Age

\*Family members include Parent(s)/ Guardian(s) and dependents. All Family members **must reside** at the same address.

Please list below the name of the nanny(s)/baby sitter(s) that will be included with your Family pass (if applicable). Please Note there is an additional charge for each Nanny pass.

	Phone Number	
	Phone Number	
	Phone Number	

**Emergency Contact Information**

Name		Phone	
Address		Cell	
Relationship			

Name		Phone	
Address		Cell	
Relationship			

I, the undersigned, agree to follow all safety rules posted for participating at the City of Warren Municipal Pool and the requests of the lifeguards and employees at the City Pool. I understand that lifeguards are primarily responsible for watching participants while they are in the water and that parents and other child supervisors are responsible for children outside of the water. I agree to hold the City of Warren harmless from any and all claims, causes of action, and the like arising from or out of attending or being present at the City of Warren Municipal Pool.

I authorize medical treatment for myself and any member of my family that may be recommended by an attending physician in the event of a medical emergency.

Signature		Date	
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**Please check the City’s Web Site for the Season Pool Pass Rates.**

**[www.cityofwarrenpa.gov/pool](http://www.cityofwarrenpa.gov/pool)**

If you require assistance with completing this form or another reasonable accommodation as defined by the American with Disabilities Act (ADA) please contact the City’s ADA Coordinator at 814-723-6300.